

§ 18A-22  
 Rev. 5/98  
**FINANCIAL AFFIDAVIT**  
 IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

IN UNITED STATES ☒ MAGISTRATE ☐ DISTRICT ☐ APPEALS COURT or ☐ OTHER PANEL (Specify below)

IN THE CASE OF

U.S. DEMKOVA V.S. DEMKOVA

FOR

AT

ND IL

ED

7-31-08 JUL 31 2008

MAGISTRATE JUDGE SUSAN E. COX  
UNITED STATES DISTRICT COURT

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

IRENE DEMKOVA

CHARGE/OFFENSE (describe if applicable & check box →)

REMOVAL

☒ Felony  
☐ Misdemeanor

- ☒ 1 Defendant—Adult  
☐ 2 Defendant - Juvenile  
☐ 3 Appellant  
☐ 4 Probation Violator  
☐ 5 Parole Violator  
☐ 6 Habeas Petitioner  
☐ 7 2255 Petitioner  
☐ 8 Material Witness  
☐ 9 Other

DOCKET NUMBERS

Magistrate

08 CR 607-1

District Court

Court of Appeals

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

ASSETS	EMPLOYMENT	Are you now employed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Am Self-Employed Name and address of employer: <u>ON MEDICAL LEAVE</u> IF YES, how much do you earn per month? \$ <u>0</u> IF NO, give month and year of last employment How much did you earn per month? \$ _____ If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, how much does your Spouse earn per month? \$ _____ If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____
	OTHER INCOME	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES RECEIVED \$ _____ SOURCES _____
	CASH	Have you any cash on hand or money in savings or checking accounts? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ <u>7,500.00</u>
	PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, GIVE THE VALUE AND \$ DESCRIBE IT VALUE _____ DESCRIPTION _____

OBLIGATIONS & DEBTS	DEPENDENTS	MARITAL STATUS <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED Total No. of Dependents _____ List persons you actually support and your relationship to them _____																			
	DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)	<table border="1"> <thead> <tr> <th>APARTMENT OR HOME:</th> <th>Creditors</th> <th>Total Debt</th> <th>Monthly Paymt.</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td>\$ 3500.00</td> <td></td> </tr> <tr> <td></td> <td></td> <td>\$</td> <td>\$</td> </tr> <tr> <td></td> <td></td> <td>\$</td> <td>\$</td> </tr> <tr> <td></td> <td></td> <td>\$</td> <td>\$</td> </tr> </tbody> </table>	APARTMENT OR HOME:	Creditors	Total Debt	Monthly Paymt.			\$ 3500.00				\$	\$			\$	\$			\$
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I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

SIGNATURE OF DEFENDANT  
(OR PERSON REPRESENTED)

*[Signature]*

7/31/08